

Bulletin

January 26, 2005

Minnesota Department of Human Services ■ 444 Lafayette Rd. ■ St. Paul, MN 55155

OF INTEREST TO

- County directors
- Tribal social services
- Child protection supervisors
- Child protection workers
- County public health agencies

ACTION

Review and ensure that staff are aware of safety precautions.

DUE DATE

Immediately

Safety Precautions in Methamphetamine Lab Sites for Child Protection Workers

TOPIC

Safety precautions are necessary when intervening in cases that involve an active methamphetamine lab.

PURPOSE

Provide guidance for county staff responding to a child protection case where an active methamphetamine lab site is found.

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SIGNED

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Introduction

The prevalence of clandestine methamphetamine manufacturing labs is increasing rapidly in Minnesota and other Midwestern states. The methamphetamine manufacturing process involves highly toxic and explosive chemicals that release hazardous vapors and residue. The residue settles inside the structure, continuing to contaminate the premises until it is thoroughly decontaminated. Anyone entering a meth lab may be exposed to contaminants through respiratory or skin contact with the chemical vapors and/or chemical residue if safety precautions are not carefully followed, and may carry the contaminants on their skin, clothing and shoes spreading the contamination to their car, office and home. Health risks involve both short and long-term illness. Not much is known about the dosage required to cause illness. It is imperative that safety precautions be followed.

The Department of Human Services encourages social service agencies responding to cases involving methamphetamine labs to exercise safety precautions to minimize exposure to toxic chemicals.

Hazards

The use of methamphetamine is associated with aggressive behavior. Violence from a person involved in the manufacture or use of methamphetamine may be a threat to those who encounter a meth lab.

Other hazards to be aware of are possible “booby traps” with explosives or toxins. Firearms have been found in many labs. In the meth lab site, contaminated needles or broken glassware may be present.

Chemicals used to manufacture methamphetamine vary, based on the recipe, cooking process used and availability of ingredients. Labs often contain a variety of chemicals including (but not limited to) toluene, denatured alcohol, ether, freon, hydrochloric acid and sodium hydroxide. Other poisons such as mercury and lead may also be present. Chemicals continue to be a threat after the methamphetamine production has stopped because the toxins permeate the air inside the home and chemical residue settles on any surface, including walls, carpeting, furniture, fabric, etc. The chemical residue remains a toxic hazard long after the meth lab has been shut down.

Health Risks

Exposure to the toxic chemicals used to manufacture methamphetamine can cause short and long-term health effects that vary depending on the amount and route of exposure and the chemicals involved. The list below includes some symptoms that may develop following exposure to toxins found in methamphetamine labs, but it is not an exhaustive list. Medical evaluation and treatment may be indicated if symptoms of illness develop following contact with methamphetamine lab chemicals or residual toxins.

Possible symptoms related to short-term chemical exposure

- Cough
- Chest pain or tightness
- Headache
- Shortness of breath
- Skin and eye irritation
- Chemical burns
- Nausea
- Lethargy

Worker Safety Precautions

If a worker is in a home that appears to be a methamphetamine lab, they should leave quickly and notify law enforcement immediately.

The Minnesota Department of Health recommends that the following precautions be taken by child protection workers to prevent transfer of contaminants beyond the meth lab. Child protection workers should refrain from entering a known meth lab site, if possible. Law enforcement officers who are trained and have protective equipment will enter the home or structure and take photographs or videotape the conditions within the home. It is recommended that the children's belongings not be removed from the home unless it is a medical device.

If it is necessary to enter the meth lab site, workers should wait until law enforcement officers have dismantled the meth lab and booby traps, removed the hazardous chemicals and objects, and ventilated the structure long enough for it to be minimally safe to enter (usually several hours). If it is necessary to enter, do not remain in the structure any longer than necessary. When entering a lab site after it has been ventilated, workers should wear a lab coat to cover their clothing and disposable protective shoe coverings should be worn. The lab coat and shoe coverings must be removed upon exiting the structure. The protective shoe coverings must be disposed at the lab-site in a container for hazardous waste. The lab coat must be placed in a paper bag until it can be washed. Plastic bags are not to be used because the toxic chemicals build inside of the plastic and can be very harmful when the bag is opened. Wash exposed skin after leaving the lab site. If any items are removed from the home, such as a child's nebulizer, favorite toy or blanket, the items should also be placed in a paper bag until they can be washed. To decontaminate cloth items, launder them twice in a washing machine with hot water and laundry detergent. If a garment cannot be washed with hot soapy water, it must be thrown out. Do not dry clean clothing that has been contaminated. Dry cleaning will not remove the contaminants and may cause a chemical reaction. Children's plastic toys can be decontaminated by washing through two cycles of a dishwasher with dishwasher detergent. When using the clothes washer or dishwasher for decontamination, wash only those items requiring decontamination. Do not include routine laundry or dishes in the decontamination wash cycles. A nebulizer must be wiped clean with hot, soapy water.

When a child is removed from a meth lab site, an assessment must be done regarding the amount of exposure they may have had before the child is transported. An emergency medical technician

should assess the child's immediate health condition before the child is transported. Olmsted County and the Mayo Clinic prepared a medical protocol that can be used as a guide and is available on the Supervisor's Web-site under child protection.

http://www.dhs.state.mn.us/main/groups/county_access/documents/pub/DHS_id_000308.hcsp

If the child can be transported to foster care, precautions should be taken before placing the child in a car to prevent transfer of the contaminated residue from the child's clothing and shoes to the car or to the foster home. If the meth lab was in a structure away from the child's living environment, the child may be carrying a smaller amount of contaminants on their clothing, body and hair. If the child had minimal exposure to the contaminants, wrap him/her in a sheet and remove his/her shoes before transporting the child to the foster home. If the lab site was inside the child's home, the child may carry a larger amount of contaminants on their clothing and body, so a number of steps should be taken. Law enforcement may have set up a decontamination tent where contaminated clothing can be removed and a portable shower is available. Depending on the level of contamination and exposure, a child may not need to shower, but disposable towelettes should be used to wipe the child's exposed skin. A change of clothing should be provided to prevent transfer of the contaminants. When the child arrives at the foster home, they should take a shower or bath to wash contaminants from their skin and hair to prevent transfer of contaminants in the foster home.

Training

The Child Welfare Training System has developed training on methamphetamine cases that address the public health risks, safety precautions, medical evaluations for children found in methamphetamine labs and chemical dependency treatment issues. The training is being presented by interactive television to 29 county sites beginning in February 2005. Copies of the training will be available by video-tape through the Department of Human Services. Additional training sessions may be scheduled later in the year. To request a recorded copy of the training sessions, please contact the Child Welfare Training System Area Training Manager in your area or the Minnesota Department of Health Library.

- Northeast Area Training Manager: Joan Hatlestad (218) 723-4979 or jhatlest@umn.edu
- Northwest Area Training Manager: Linda Pagenkopf (218) 937-5700 or lpagenkopf@rrt.net
- Southeast Area Training Manager: Joyce Purdy (507) 377-0574 or jlpurdy@smig.net
- Southwest Area Training Manager: Brenda Sandquist (320) 587-7639 or bsandqui@hutchtel.net
- Upper Southeast Area Training Manager: Brenda Lockwood (612) 624-4779 or blockwoo@che.umn.edu

Special Needs

This information is available in other forms to people with disabilities by contacting us at (651) 282-5329 (voice). TTY/TDD users can call the Minnesota Relay at 711 or (800) 627-3529. For speech to Speech Relay, call (877) 627-3848.